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Steven Bellone
Suffolk County Executive



Frank Nardelli
Commissioner

SUFFOLK COUNTY DEPARTMENT OF LABOR, LICENSING & CONSUMER AFFAIRS

P.O. Box 6100, Hauppauge, NY 11788-0099 (631) 853-4600 FAX (631) 853-4825

APPLICATION FOR HOME IMPROVEMENT LICENSE

Please Print - Answer All Questions

APPLICANT'S NAME: LAST Kelly FIRST John M.I. F.

DATE OF BIRTH: [REDACTED] SOCIAL SECURITY #: [REDACTED]

HOME STREET ADDRESS: [REDACTED]

TOWN: St. James STATE: NY ZIP: 11780

HOME PHONE: [REDACTED] EMAIL: johnk@kelcoland.com

CELL PHONE: [REDACTED] FAX: 631 462-3524

BUSINESS NAME(S): Kelco Landscaping Inc

BUSINESS STREET ADDRESS: 40 Austin Blvd, 2nd Floor

TOWN: Commack STATE: NY ZIP: 11725

BUSINESS PHONE: 631 462 2952 FAX: 631 462-3524

EMAIL: terrip@kelcoland.com

IMPORTANT! PLEASE NOTE THAT YOUR BUSINESS TELEPHONE NUMBER LISTED HERE WILL BE THE KEY NUMBER BY WHICH PEOPLE WILL BE ABLE TO SEARCH THE LABOR, LICENSING, & CONSUMER AFFAIRS WEBSITE TO DETERMINE WHETHER OR NOT YOU HAVE A VALID LICENSE. IT IS IMPERATIVE THAT YOU LIST THIS CORRECTLY AND THAT THIS BE THE NUMBER YOU USE ON YOUR BUSINESS CARDS, CONTRACTS, ADVERTISING, ETC.

Type Business

☒ Corporation ☐ Partnership ☐ Sole Proprietorship ☐ Other

1. Federal Tax ID No. [REDACTED]

2. Worker's Compensation No. 3152 W 7675

3. NYS Sales Tax Registration No. [REDACTED]



Do you subcontract your work? ☐ Yes ☒ No If yes, name & address of Subcontractor

Personal Reference (not related by blood or marriage)

Name: Joseph Provenzano Tel: [REDACTED]

Address: [REDACTED] 1174

1. Each Home Improvement Business must be licensed. Each separate Business requires a separate license.
2. Licensed Home Improvement contractors do not need a salesperson's identification card.
3. Corporate Officers or partners other than applicants will require a salesperson's identification card.

THIS IS AN APPLICATION: NOT A LICENSE

312571 3/3/16.
312072 2/24/16.
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H-10202

List all additional business names and addresses in which you are principal officer: including location of all branches and separate offices. If "None", write none.

Business	Address	Principal type of work
Kelco Construction Inc	40 Austin Blvd Commack NY 11725	Landscape Construction

List President, Vice President, Secretary and Treasurer, principal officers or partners. Include present position. If you are the only owner, list yourself for all four (4) positions. If you own a Limited Liability Corporation (LLC) all officers must be listed. If "None", write none.

Name	Address	Position in Firm
John Kelly	[REDACTED] St James NY 11780	President
John Kelly	[REDACTED] St James NY 11780	Vice President
John Kelly	[REDACTED] St James NY 11780	Secretary - Treasurer

List all previous business or subsidiaries in which you were a principal officer, all other associated officers and present status of the business (i.e. defunct, bankrupt, sold, etc.) If "None", write none.

Business Name	Address	Associated Officers	Present Status
N/A			

List name(s) of current employees, officers or partners who companies engaged in the Home Improvement field during address and dates of affiliation. Use additional sheets if ne

N/A

Names and home addresses of all salespersons currently in Suffolk County. If "None", write none.

None

Are you presently or have you ever been licensed in Suffolk County?

☒ Yes ☐ No

If Yes, Where: SC Consumer Affairs License # _____ Type License Home Improvement

Expiration Date _____ If more than one, list _____

Remit application fee of \$200.00 (non-refundable) made payable to: Suffolk County Consumer Affairs

Sec. 175.35-Offering a false instrument for filing in the first degree:

A person is guilty of offering a false instrument for filing in the first degree when, knowing that a written instrument contains a false statement or false information, and with intent to defraud the state or any political subdivision thereof, he offers or presents it to a public office or public servant with the knowledge or belief that it will be filed with, registered or recorded in or otherwise become a part of the records of such public office or public servant.

Offering a false instrument for filing in the first degree is a class E felony.

L. 1965, c. 1030

Signed _____

Date _____

2/16/16

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I can't find
our old license
So I don't
know the number
or expiration date

ed in



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STATE OF NEW YORK)

COUNTY OF SUFFOLK) ss:

AFFIRMATION

(Name)

John Kelly

(Company Name)

Kelco Landscaping Inc

1. You must check either (A) or (B)

☒ (A) I affirm that there have never been any judgments filed against the above named individual applicant or firm.

☒ (B) I affirm that all judgments against me have been discharged, are being appealed, or being paid according to agreed scheduled payments with creditors and that there are no unsatisfied or unnegotiated judgments against either the above named individual applicant or firm.

2. I hereby acknowledge that I have been advised, and am fully aware, that Suffolk County Code Chapter 563 requires that any individual who negotiates or offers to negotiate a contract for the above named licensee with a consumer, or solicits or otherwise endeavors to procure a contract from a consumer on behalf of the above named licensee, whether or not such individual is an employee of the above named licensee, will first obtain an identification card from the Suffolk County Department of Labor, Licensing, & Consumer Affairs.

3. I certify that all contractors/sub-contractors will have in their possession a valid Suffolk County Occupational License as required by Suffolk County Code.

4. Briefly describe work to be performed:

Note: This must match the "Description of Operations" on your certificate of insurance

Install plant material, sod, soil, seed

Landscaping Services

5. I understand that if I am a landscaper using fertilizers or pesticides, I must submit proof of NYS Department of Environmental Conservation Certificate.

6. I UNDERSTAND THAT A HOME IMPROVEMENT LICENSE DOES NOT ALLOW ME TO CONTRACT FOR HVAC WORK OTHER THAN DUCT WORK

Individual's Name and Title John Kelly

Company Name Kelco Landscaping Inc

AFFIRMATION (To be completed by Applicant): I AFFIRM UNDER PENAL TIES OF THE PENAL LAW, THAT I PREPARED THIS APPLICATION AND THAT THE STATEMENTS CONTAINED HEREIN ARE, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE AND CORRECT AND THAT I HAVE NOT KNOWINGLY AND WILLFULLY MADE A FALSE STATEMENT OR GIVEN INFORMATION WHICH I KNOW TO BE FALSE IN CONNECTION HEREWITH.

COMPLIANCE AFFIRMATION: I understand the issuance of my license requires compliance with all laws applicable to my business. I understand that Title 8 USC 1324a makes the hiring of unauthorized aliens unlawful and imposes record keeping responsibilities if I am an employer. I am also obligated to pay taxes for employees I may have. I affirm I am now and have been in compliance with Title 8 USC 1324a and I have paid/will pay all required payroll tax payments for any employee including Social Security, Medicare and State and Federal unemployment taxes. I AFFIRM THAT THE STATEMENTS ON THIS LICENSE APPLICATION ARE TRUE.

Signed

Date

2/16/16

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Describe your work or business experience or knowledge of the trade that qualifies you for the license for which you are applying-be specific. Who did you work for? For how long? What were your duties? Have you attended any trade schools? If so, when?

30 years working in the landscaping industry. Started out on residential landscaping and built the company to a 40 million dollar/year business doing major landscape construction projects in NYC. I've worked for NYC Parks Dept, Battery Park City, Brooklyn Bridge Development Corp, Governors Island, Brooklyn Botanical Gardens, World Trade Center, USTA Tennis Center, Metropolitan Museum, Museum of Modern Art, Hudson River Park, United Nations, Central Park Conservancy, many, many high profile projects. Our services include installing plant material, large trees, sod, soil, and all landscaping materials. We've built playgrounds, parks, ball fields, gardens and more. Extensive background in all aspects of landscape construction.